## POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3 73(b).					
l hereby appoint:					
X Practitioners associated with the Customer Number: 65901					
OR					
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):					
Name Registration Name Registration					
748.150		Number	Name		Registration Number
1000					
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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any antionary of the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 373(b).					
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:					
The attached statement under 37 CFR 3.73(b) to:					
The address associated with Customer Number: 65901					
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Firm or					
Individual Name					
Address					
City		State			
		State		Zip	
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Telephone		***************************************	Email		
Assignee Name and Address:					
KYPHON INC.					
1221 Crossman Avenue					
Sunnyvale, CA 94089					
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of					
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.					
and most restrary the application in which this rower of Attorney is to be filed.					

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignce Signature Date Name Johnson Telephone 901-396-3133 Noreen C. Title Vice President

The officers in required by Other 1. The officers of the public which is to file (and which the public which is to file (and the public which is to file (and which the public which is to complete, which will be public which is to complete, which will be public which is to complete, which will be public which the public which is to complete, which will be public which which which which we want to complete which whi

if you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.